## STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received Official Use Only

## **COVER PAGE**

Please type or print in ink.	
NAME OF FILER (LAST) (FIRST)	(MIDDLE)
1 Office Agency or Court	u unis
1. Office, Agency, or Court	
Agency Name (Do not use acronyms)  Department of Conservation	
Division, Board, Department, District, if applicable	Your Position
Division of Oil, Gas, and Getuna	Reserves, Baterofield Engineering Gologis
▶ If filing for multiple positions, list below or on an attachment. (I	,
Agency:	Position:
Agency.	FOSITION.
2. Jurisdiction of Office (Check at least one box)	
∏ State	☐ Judge or Court Commissioner (Statewide Jurisdiction)
Multi-County	County of
City of	Other
3. Type of Statement (Check at least one box)	
Annual: The period covered is January 1, 2017, through December 31, 2017.	Leaving Office: Date Left/
-or- The period covered is/, December 31, 2017.	
Assuming Office: Date assumed 1 36 /2018	
☐ Candidate: Date of Election and offi	ce sought, if different than Part 1:
<ol> <li>Schedule Summary (must complete) ► Total</li> <li>Schedules attached</li> </ol>	number of pages including this cover page:
Schedule A-1 - Investments – schedule attached	Schedule C - Income, Loans, & Business Positions – schedule attached
Schedule A-2 - Investments – schedule attached	Schedule D - Income - Gifts - schedule attached
☐ Schedule B - Real Property – schedule attached	Schedule E - Income - Gifts - Travel Payments - schedule attached
<b>None -</b> No reportable interests on any schedule	
5. Verification	
MAILING ADDRESS STREET	CITY STATE ZIP CODE
(Business or Agency, Address Recommended - Public Document)	shield CA 93309
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS
(661) 322-4031	Sade haste a conternation. Ca. gov
I have used all reasonable diligence in preparing this statement. I herein and in any attached schedules is true and complete. I ac	have reviewed this statement and to the best of my knowledge the information contained
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.	
Data Signad ///20/2019	Signature Management of the Signature Management of Signature Management of Signature Management of Signature Mana
Date Signed /// 30 / 10 / 15 (month, day, year)	(File the originally signed statement with your filing official.)

## SCHEDULE A-1 Investments

## Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

(Ownership Interest is Less Than 10%) Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Sale Harke

NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Dentury Kesources GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
GENERAL DESCRIPTION OF THIS BUSINESS  REPORT TO THE BUSINESS  FAIR MARKET VALUE	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT  Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)  Partnership O Income Received of \$0 - \$499	(Describe)  Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
07 01 15	
ACQUIRED DISPOSED  NAME OF BUSINESS ENTITY	ACQUIRED DISPOSED  ► NAME OF BUSINESS ENTITY
NAME OF BUSINESS ENTITY	NAIVIE OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$100,000 \$100,000 \$100,000 \$100,000 \$100,000	\$2,000 - \$10,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other(Describe)	Stock Other(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	//
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL_DESCRIPTION_OF_THIS_BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
☐ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/	
comments: Stock Symbol: DNK	